

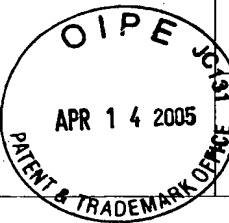

04-15-05

2182\$

PTO/SB/22 (06/04)

Approved for use through 07/31/2006. OMB 0651-0031  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) IQN0001																									
To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		In re Application of John Motler, et al.																									
		Application No. 10/042,731	Filed December 21, 2000																								
		For: System and Method for Matching Human Resources to Human Resource Needs																									
		Art Unit 2152	Examiner Michael C. Heck																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and fee are as follows (check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 20%; text-align: center;"><u>Fee</u></th> <th style="width: 20%; text-align: center;"><u>Small Entity Fee</u></th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$ 120.00</td> <td style="text-align: center;">\$ 60.00</td> <td style="text-align: center;">\$ 0</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$ 450.00</td> <td style="text-align: center;">\$ 225.00</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1,020.00</td> <td style="text-align: center;">\$ 510.00</td> <td style="text-align: center;">\$ 510.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1,590.00</td> <td style="text-align: center;">\$ 795.00</td> <td style="text-align: center;">\$ 0</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2,160.00</td> <td style="text-align: center;">\$1,080.00</td> <td style="text-align: center;">\$ 0</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1123. I have enclosed a duplicate copy of this sheet.</p> <p><b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p style="margin-left: 40px;"><input type="checkbox"/> applicant/inventor.</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record. Registration Number 33,940</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p style="font-size: 1.5em; margin-left: 50px;">4/14/05</p> <p style="margin-left: 50px;">Date</p> <p style="margin-top: 10px;">720-406-5335</p> <p style="margin-left: 50px;">Telephone Number</p> </div> <div style="width: 45%; text-align: center;">  <p style="margin-top: 10px;">Stuart T. Langley</p> <p style="margin-left: 50px;">Typed or printed name</p> </div> </div> <p style="font-size: 0.8em; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of _____ one _____ forms are submitted.</p>					<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120.00	\$ 60.00	\$ 0	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450.00	\$ 225.00	\$	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,020.00	\$ 510.00	\$ 510.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,590.00	\$ 795.00	\$ 0	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,160.00	\$1,080.00	\$ 0
	<u>Fee</u>	<u>Small Entity Fee</u>																									
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120.00	\$ 60.00	\$ 0																								
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450.00	\$ 225.00	\$																								
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,020.00	\$ 510.00	\$ 510.00																								
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,590.00	\$ 795.00	\$ 0																								
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,160.00	\$1,080.00	\$ 0																								

04/18/2005 MBIZUNES 00000012 10042731

01 FC:2253

510.00 OP